

RFP 5-70  
Question and Answers

**Q1: Is it the state's expectation that the selected vendor provide the training, course development, and course materials throughout the life of the program or only at program inception? Can you please provide additional details regarding the frequency of these sessions, approximate number of attendees at each, and expectations regarding printed materials?**

A1: Training and materials should be provided throughout the life of the contract. Training courses will be held quarterly and two additional sessions may be required. Currently the sessions average about 20-30 attendees and printed materials are provided to each attendee.

A new vendor will be required to conduct a minimum of six (6) regional sessions to facilitate the change in administrators. There are approximately 300 Benefit Coordinators throughout the State. The TPA is expected to train all 300 Benefit Coordinators and provide administrative program manuals. Presently, there are three manuals that were written in 1998. The manuals will need to be updated and printed for distribution.

**Q2: Can you confirm if the TPA will be issuing checks for all payments or an advice to pay? If the TPA is issuing checks, do you have any specific funding and banking requirements we need to contemplate? Please detail.**

A2: The TPA will be working with the State Auditor's office and the agency Benefit Coordinator to facilitate payments either through the State's regular payroll system or via a manual warrant issued by the State Auditor. In addition, there is a separate process for Quasi/Direct Bill agencies that do not utilize the State's payroll system. There are processes in place that must be utilized to issue payments and the TPA will be responsible for all employees receiving disability and worker's compensation benefits.

**Q3: Can you forward a copy of your disability benefit plan?**

A3: Plan information is available at <http://www.in.gov/jobs/laws/disability.html>.

**Q4: If the answer to the above is no, please detail the plan highlights for incorporation into the service model. Is the disability benefit plan ERISA qualified? If not, does it have an appeals process? Please detail.**

A4: The disability plan is not ERISA qualified. Employees may appeal decisions by utilizing the appeals process set by the State Employees Appeals Commission (SEAC).

**Q5: Regarding the release of financials, if the TPA is a privately held company and does not release financials as a practice, would the State of Indiana be willing to sign a mutual non-disclosure agreement to facilitate this request? If yes, please advise contact and delivery detail for submission of this document.**

A5: Please refer to page 11 of the RFP, section 1.15.

**Q6: Regarding clinical case management, please detail the State's philosophy regarding the use of nurse case management, field-case management and utilization review for the program's covered under this RFP.**

A6: The State is soliciting proposals from the vendor community; therefore, your proposal should detail the array of services you offer and your recommendations.

**Q7: Please provide more detail on the storage of closed claims. Is the TPA expected to store only those claims handled by the TPA or store all State of Indiana claims previously closed by another TPA. If the latter, what is the number of stored claims?**

A7: The TPA is expected to store only those claims handled by the TPA.

**Q8: How many workers' compensation claims are Indemnity versus Medical Only versus Record only?**

A8:	Indemnity	2002	546	2003	603	2004	592
	Medical	2002	3168	2003	3142	2004	3442
	Record	2002	601	2003	684	2004	472

**Q9: What is the number of claims filed as both workers' compensation and disability? Do these claims incur charges for both WC and disability, or is only one specialized fee charged?**

A9: 2002 – 273  
2003 – 326  
2004 – 331

See RFP, Attachment B (sample contract), Section II beginning on page 4 for the explanation of the fee structure.

**Q10: For LTD pending claims, how many claims are active versus maintenance?**

A10: The State considers a maintenance claim to be those in which the employee has been awarded Social Security Disability (SSD). Of the open LTD claims, 452 are currently receiving SSD. However, the claim is still subject to the same payroll processes or minimum benefits if applicable, health/life insurance open enrollment, continued medical follow-up and trial work as an active claim.

**Q11: How many systems users are required: view only versus ad hoc reporting users?**

A11: The State Personnel Department is the only agency that will need view only access. Currently there are four (4) employees that would need access. Additional staff may be added over the course of the contract.

**Q12: What is the required number of payroll stuffers per each distribution?**

A12: Approximately 45,000

**Q13: Please confirm the number of eligible employees on which the disability pricing should be based. Is this number the same for which workers' compensation should be based if also provided on a per employee basis?**

A13: On average, bi-weekly premiums are paid for 33,499 employees. Worker's Compensation is not per employee based.

**Q14: Please confirm there is no workers' compensation takeover of existing claims.**

A14: There is no worker's compensation takeover of existing claims.

**Q15: Please provide more detail on the consulting services requested**

A15: Please see Attachment B to the RFP, Section I, Paragraph J (Consulting Services) for a list.

**Q16: Please provide the number of requested procedure manuals.**

A16: Approximately 300 for the initial start-up.

**Q17: Please confirm the number of medical bills processed and the frequency of utilization review**

A17: In 2004, 18,635 bills were reviewed for U&C and PPO reductions of which 15% underwent further utilization review.

**Q18: Please confirm that takeover of existing disability claims is on a life of claim basis. Directions in the pricing section appear to describe life of contract pricing.**

A18: Takeover of existing disability claims is on a life of claim basis.

**Q19: Please clarify the pricing requested for LTD takeover years 1&2 versus years 3&4 – is pricing being requested for takeover claims remaining open in these years?**

A19: Takeover of existing LTD claims is on a life of claim basis.

**Q20: Are there any maximum indemnity caseload requirements? Any for disability?**

A20: There are no maximum indemnity or disability caseload requirements.

**Q21: For the bi-weekly fee requested, please confirm that your calculation will be fee/number of employees/26.**

A21: Fee multiplied by the number of employees, bi-weekly.

**Q22: On the workers' compensation request to have fee on an administrative fee per eligible employee basis, is the calculation fee/number of employees or fee/number of employees/26 as with disability?**

A22: The State has not requested a fee per eligible employee basis; therefore, you should specify the terms of the proposal you make.

**Q23: I would like to know how many employees your organization has?**

A23: 35,255 active full-time employees  
38,492 total employees

- includes some judicial branch employees
- excludes Quasi/Direct Bill employees